



Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997 **CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY SMALL ENTITY** (Column 1) (Column 2) TYPE OR **FOR NUMBER EXTRA NUMBER FILED** RATE FEE RATE FEE **BASIC FEE** 395.00 790.00 OR **TOTAL CLAIMS** minus 20 = x\$11=x\$22= OR INDEPENDENT CLAIMS minus 3 = x41 =x82 =OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR **CLAIMS AS AMENDED - PART II OTHER THAN** (Column 1) (Column 3) (Column 2) OR **SMALL ENTITY SMALL ENTITY CLAIMS** HIGHEST ⋖ REMAINING PRESENT ADDI-ADDI-**NUMBER** AFTER **RATE TIONAL** ENDMENT **PREVIOUSLY EXTRA** RATE **TIONAL** AMENDMENT FEE PAID FOR FEE Total Minus x\$11=x\$22=OR Independent Minus x41 =x82 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= OR +270= TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST REMAINING ADDI-ADDI-**PRESENT** NUMBER **AFTER** RATE TIONAL RATE **AMENDMENT** TIONAL **PREVIOUSLY EXTRA** AMENDMENT FEE FEE PAID FOR Total Minus x\$11=x\$22=**OR** Independent Minus x41 =OR x82 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= OR +270= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-REMAINING ADDI-**PRESENT** NUMBER **AFTER** RATE **TIONAL** RATE **AMENDMENT** TIONAL **EXTRA PREVIOUSLY AMENDMENT FEE** FEE PAID FOR Total Minus x\$11=x\$22= OR Independent Minus x41 =OR x82 =

"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

OR

OR

+270=

TOTAL

+135=

ADDIT. FEE

TOTAL

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PATENT APPLICATION FEE DETERMINATION RECORD Effective & tober.1, 2000										2	
CLAIMS AS FILED - PART I						SMALLENTITY OTHER THAN					
(Column 1) (Column 2)							FEE	Γ	RATE	FEE	
OR		NUMBER	NUMBER FILED NUMBER EX			RAT		\$ 3 55	OR	AL THE WANTED	\$740
ASIC	FEE							1 330		X\$18=	74-
TOTAL CLAIMS		1-18	minus 20= *			ļ	X\$ 9=		OR	X80 =	
NDEPENDENT CLAIMS			minus 3	= *		X4)= -		OR		
MULTIPLE DEPENDENT CLAIM PRESENT						+13	+135 =		OR	+270=	0110
* If the difference in column 1 is less than zero, enter "0" in column 2									OR	TOTAL	1740
CLAIMS AS AMENDED - PART II							ALL	ENTITY	OR	OTHER SMALL!	ENTITY
	F	Column 1) CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMEN A	otal *	MENDMENT	Minus	PAID FOR	=	X\$	9=		OR	X\$18=	·
	ndependent *		Minus	***	=	X!	10= .	·	OR	X80=	
Ž F	IRST PRESENTA	ATION OF MU	LTIPLE DEP	ENDENT CLAIM		+/=	35 =		OR	+270=	
			<i>:</i> .			L	OTAL		OR	ADDIT. FEE	
						ADDIT. FEE					
		(Column 1)		(Column 2)	(Column 3)			ADDI-	7		ADDI-
8		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	TIONAL		RATE	TIONA
ME	Total *	MENDMENT	Minus	**	=	X	9=	·	OF	X\$18=	<u> </u>
필	Independent *	· · · · ·	Minus	***	=	×	40=		OF	X80=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+1	35=		OF	+270=	
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· (Column 1) (Column 2) (Column 3)											ADD
10		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONA FEE		RATE	TION
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	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.						135=	.	-	TOT	AL.
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=	If the "Highest Num "If the "Highest Num The "Highest Numb	nber Previously	Pald For IN T	HIS SPACE Is less	tion 3, enter "3." the highest numb	er found			box in	column 1.	
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NOTICE OF FILING/CLAIM FEE(S) DUE

TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THE FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: 09/8/332

Office of Initial Patent Examination

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	x_	F⇔	F c= =	Tor
	Sm./Lg.			÷	Sm. Entity	Lg. Entity	···
Basic Filing Fee	-201/101	.0					790
Total Claims >20	203/103	-20 =		x		_	
Independent Claims >3	202/102	3 -3 =	•	x			
Mult Dep Claim Present	204/104						
Surcharge .	205/105						130
English Translation	139						
TOTAL FEE CALCUL	ATION		_ ,				900
Fees due upon filing th	ne application:						
Total Filing Fees Due	•	gro.	· .		,		
Less Filing Fees Subm	itted - \$ _	od					
BALANCE DUE	= \$ _	920	,=	.		-	_·
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